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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/579,134			ing Date 11/2006	☐ To be Mailed
	Al	PPLICATION	AS FILE	OTHER THAN SMALL ENTITY ☑ OR SMALL ENTITY								
Н	FOR	N	UMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A			N/A			N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A			N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		П	x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		٠			X \$ =		1	X S =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and dra sheets of paper, the applii is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* 15	the difference in colu	umn 1 is less than	r "0" in colu		TOTAL		]	TOTAL				
APPLICATION AS AMENDED – PART II         OTHER THE           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL EN												
AMENDMENT	06/23/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	· 17	Minus	20		= 0	П	X \$26 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 3	Minus	3		<b>-</b> 0	П	X \$110 =	0	OR	XS =	
	Application Size Fee (37 CFR 1.16(s))									П		
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)												
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ä	Total (37 CFR 1,16())		Minus	**			П	X \$ =		OR	x s =	
Š	Independent (37 CFR 1 16(h))		Minus	***		-	ı	X \$ =		OR	X 8 =	
AMENDMENT	Application Size Fee (37 CFR 1:16(s))									]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						ı			OR		
I if the order in column 1 is less than the order in column 2 wills 100 in actions 2								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, wite 0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Previously Paid For NT HIS SPACE is less than 3, enter "20".  "If the "Highest Number Previously Paid For NT HIS SPACE is less than 3, enter "3".  "If the "Highest Number Previously Paid For NT HIS SPACE is less than 3, enter "3".  HELEN A PAYTON.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 39 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to comprise, including patient in preparing, and submitting the comprised application from the USPTO. Time will way depending upon the individual case. Any comments on the amount of time you require to comprise this form and/or suggestions for reducing this founds. about 0 be sent to the Chief Information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Disc videy, Alexandria, V.M. 22313-1450, D.O. NOT SEND FEES OR LOWNELEET D-FIRM TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.